

# TITLE 631 WORKER'S COMPENSATION BOARD OF INDIANA

## Proposed Rule

LSA Document # 11-357

### DIGEST

Amends Title 631 Worker's Compensation Board to make language conform to current terminology used at IC 22-3-1 et seq. Further amends 631 IAC 1-1-19 (hereinafter only specific sections of Title 631 shall be mentioned) to update role of Executive Administrator; 1-1-23 to deny attorney who violates the Worker's Compensation or Occupational Diseases Act permission to practice before the Board; 1-1-25 to require a medical bill review service to complete annual certificate; 1-1-28 to require filing of certain forms electronically; 1-1-31 to set the date Second Injury Fund benefits become due as the latter of date of filing of application or eligibility. Adds 1-1-28.5 requiring exempt entities under IC 22-3-2-5 to file notice of their election with the Board; 1-1-32 creating guidelines for filing and paying medical provider fee claims; and, 1-1-33 establishing a fee for Board conducted mediations, as required by IC 22-3-4-4.5. Effective 30 days after filing with the Publisher.

### IC 4-22-2.1-5 Statement Concerning Rules Affecting Small Businesses

### 631 IAC 1-1-2 through 631 IAC 1-1-33

SECTION 1. 631 IAC 1-1-2 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-2 Forms; publication and distribution of pamphlets

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-2](#); [IC 22-3-4-3](#); [IC 22-3-6](#); [IC 22-3-7-25](#)

Sec. 2. (a) The ~~industrial board~~ **Worker's Compensation Board (hereinafter commonly referred to as the Board)** will prepare and furnish free of charge all proper sample forms required by the provisions of the "Indiana ~~Workmen's~~ **Worker's** Compensation Act ([IC 22-3-2-IC 22-3-6](#))" and "The Indiana ~~Workmen's~~ **Worker's** Occupational Diseases Act ([IC 22-3-7](#))," and all pleadings, reports, and papers filed with the ~~industrial~~ Board must be in the prescribed form.

(b) Any pamphlets prepared and published by the ~~industrial Board~~ containing a concise text of "The Indiana ~~Workmen's~~ **Worker's** Compensation Act ([IC 22-3-2-IC 22-3-6](#))," "The Indiana ~~Workmen's~~ **Worker's** Occupational Diseases Act ([IC 22-3-7](#))," and "Rules of the ~~Industrial~~ **Worker's Compensation** Board (630 IAC 1-1-39 IAC 1-1-41 and 630

IAC 1-1-42) [Rules 39, 41, and 42, renumbered 630 IAC 1-1-39 by the revisor, was repealed filed May 12, 1983, 10:15 am: 6 IR 1248]," shall be **made available on the Board's Web site and** distributed by the ~~secretary of the industrial Board~~ to anyone requesting such pamphlets, provided, however, that the **Board** may make a reasonable cost charge for such pamphlets. All monies collected from the sale of said pamphlets, shall be turned over ~~by the secretary of the industrial board~~ to the general fund of the state of Indiana to help defray the printing expenses for said pamphlets. (*Worker's Compensation Board of Indiana; Rule 2; filed Jul 17, 1963, 11:10 pm: Rules and Regs. 1964, p. 105; filed Aug 31, 1966, 2:15 pm: Rules and Regs. 1967, p. 83; filed May 12, 1983, 10:15 am: 6 IR 1239, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305*) NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-2) to the Worker's Compensation Board of Indiana (631 IAC 1-1-2) by P.L.28-1988, SECTION 121, effective July 1, 1988.

SECTION 2. IAC 1-1-3 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-3 Rules of practice in proceedings

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-2](#); [IC 22-3-4-6](#); [IC 22-3-6](#); [IC 22-3-7-24](#)

Sec. 3. Except as provided below the ~~industrial Board~~ will not be bound by any technical rules of practice in conducting hearings, but will conduct such hearings and make such investigations in reference to the questions at issue in such manner as in its judgment are best adapted to ascertain and determine expeditiously and accurately the substantial rights of the parties and to carry out justly the spirit of "The Indiana ~~Workmen's~~ **Worker's** Compensation Act ([IC 22-3-2-IC 22-3-6](#))," and "The Indiana ~~Workmen's~~ **Worker's** Occupational Diseases Act ([IC 22-3-7](#))." However, the ~~industrial Board~~ incorporates by reference the provisions of Trial Rules 26 through 37, as amended, of the Indiana Rules of Trial Procedure, into this rule. (*Worker's Compensation Board of Indiana; Rule 3; filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 72; filed May 12, 1983, 10:15 am: 6 IR 1240, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305*) NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-3) to the Worker's Compensation Board of Indiana (631 IAC 1-1-3) by P.L.28-1988, SECTION 121, effective July 1, 1988.

SECTION 3. IAC 1-1-4 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-4 Pleadings in subsequent proceedings

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-4-2](#); [IC 22-3-7-24](#)

Sec. 4. The applications or petitions for the review or modification of any award or order of the ~~industrial Board~~ shall be entitled with parties, plaintiff and defendant, as in the proceedings, in which the award or order was made, bear the number of the original proceedings and be filed therein. (*Worker's Compensation Board of Indiana; Rule 5;*

*filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 72; filed May 12, 1983, 10:15 am: 6 IR 1240, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305) NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-5) to the Worker's Compensation Board of Indiana (631 IAC 1-1-4) by P.L.28-1988, SECTION 121, effective July 1, 1988.*

SECTION 4. IAC 1-1-5 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-5 Pleadings and papers to be printed or typewritten; filing; service

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-4-2](#); [IC 22-3-7-24](#)

Sec. 5.(a) All applications must be printed or typewritten in the manner prescribed by the Board and must be filed in triplicate— **with an adequate number of addressed stamped envelopes to effect service of the filing.**

(b) After filing the original application with the ~~industrial~~ Board, all subsequent petitions, motions, complaints, answers, special answers, appearances, briefs or other pleadings filed with the industrial board shall contain the **street and e-mail** address and telephone number of the party or counsel filing the document and a certification that on or before the day of filing a copy of said document was served upon the opposing party or counsel. The ~~industrial~~ Board incorporates the provisions of Trial [Rule 5](#), as amended, Indiana Rules of Trial Procedure, by reference into this rule for the purposes of the calculation of time limitations with regard to service and filing of documents with the ~~industrial~~ Board.

(c) Parties desiring to file briefs must do so on or before the date of hearing or at such time as the ~~industrial~~ Board may determine. Applications and other documents should be filed on 8 1/2" x 11" paper. (*Worker's Compensation Board of Indiana; [Rule 6](#); filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 72; filed Aug 31, 1966, 2:15 pm: Rules and Regs. 1967, p. 83; filed May 12, 1983, 10:15 am: 6 IR 1240, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305) NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-6) to the Worker's Compensation Board of Indiana (631 IAC 1-1-5) by P.L.28-1988, SECTION 121, effective July 1, 1988.*

SECTION 5. IAC 1-1-7 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-7 Defendants

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-4-2](#); [IC 22-3-7-24](#)

Sec. 7. All persons should be joined as defendants against whom the right to any relief is alleged to exist, whether jointly, severally, or in the alternative, and the ~~industrial~~ Board at any time, upon a proper showing, or of its own motion, may order that any additional party be joined, when it deems the ~~presence~~ ~~[sic.]~~ **presence** of such party necessary. (*Worker's Compensation Board of Indiana; [Rule 8](#); filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 73; filed May 12, 1983, 10:15 am: 6 IR 1241, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305) NOTE: Transferred from the*

*Industrial Board of Indiana (630 IAC 1-1-8) to the Worker's Compensation Board of Indiana (631 IAC 1-1-7) by P.L.28-1988, SECTION 121, effective July 1, 1988.*

SECTION 6. IAC 1-1-10 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-10 Expediting proceedings; notice of hearings; continuances

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-2](#); [IC 22-3-4-6](#); [IC 22-3-6](#); [IC 22-3-7-24](#)

Sec. 10. (a) The policy of the ~~industrial Board~~, implementing the spirit of the ~~Workmen's~~ **Worker's** Compensation Act ([IC 22-3-2-IC 22-3-6](#)), is to determine all questions brought before it as speedily and expeditiously as possible. Therefore, proceedings before the ~~industrial Board~~ shall be conducted with the least possible expense and with the greatest practical dispatch. Notice of all hearings and proceedings before the **Board**, unless otherwise directed by statute, shall be given by **electronic mail when possible. If not, notice shall be by U.S.** mail, and proof of the mailing of any such notice shall be prima facie proof of the service thereof.

(b) The ~~secretary of the industrial Board~~ shall give ~~written~~ notice by **electronic or U.S.** mail to all parties or their counsel of each hearing scheduled before either a single hearing member or the full ~~industrial Board~~. When it appears from the **Board's** records of ~~the industrial Board~~ that any party in a proceeding pending before ~~the industrial board~~ it is represented by an attorney, such notices as well as all other communications concerning such proceeding shall be sent to such attorney or attorneys. Unless otherwise ordered by the ~~industrial Board~~, at least ten (10) days' notice of all hearings will be given from the date of mailing the notice thereof.

(c) There shall be no continuances granted to either party except for good cause shown by motion. All requests for continuances must be filed not less than ten (10) days before a scheduled hearing. Any request for continuance filed less than ten (10) days prior to a scheduled hearing will be denied unless there shall be conclusively shown in the motion or petition that, in addition to good cause for the continuance, an emergency exists excusing the late filing of the request.

(d) If a request for a continuance is refused by the ~~industrial Board~~, the ~~industrial Board~~ may proceed to make any adjudication necessary for a final determination of a pending application. (*Worker's Compensation Board of Indiana; Rule 12; filed Jul 17, 1963, 11:10 pm: Rules and Regs. 1964, p. 106; filed Aug 31, 1966, 2:15 pm: Rules and Regs. 1967, p. 84; filed May 12, 1983, 10:15 am: 6 IR 1241, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305*) NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-12) to the Worker's Compensation Board of Indiana (631 IAC 1-1-10) by P.L.28-1988, SECTION 121, effective July 1, 1988.

SECTION 7. IAC 1-1-11 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-11. Stipulations

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-3-6](#); [IC 22-3-7-24](#)

Sec. 11. **(a)** ~~The parties to any proceeding before the industrial Board may~~ **shall** stipulate ~~as possible~~ the facts in writing **whenever possible and thereupon**. **If all related facts and issues are so stipulated,** the Board ~~will~~ **may** make its order or award **without a hearing.**

**(b)** Where the stipulation covers a permanent partial impairment, it will be necessary to file with said stipulation ~~with the industrial board~~ a report of a physician furnished by the employer and also a report of a physician employed by and representing the employee, as to their opinions of percent of permanent partial impairment unless such reports have been previously filed. The employee may waive examination by a physician other than the one provided by the employer. In such cases, the employee's written waiver shall be filed with the report of the employer's physician.

**(c)** To the end that proceedings may be disposed of expeditiously and with the least possible expense to the parties and the state, the **Board** desires to encourage the parties to stipulate facts whenever it can reasonably be done. (*Worker's Compensation Board of Indiana; Rule 13; filed Aug 2, 1949, 3:50 pm; Rules and Regs. 1950, p. 75; filed May 12, 1983, 10:15 am; 6 IR 1242, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305*) **NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-13) to the Worker's Compensation Board of Indiana (631 IAC 1-1-11) by P.L.28-1988, SECTION 121, effective July 1, 1988.**

#### SECTION 8. IAC 1-1-15 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-15. Facts upon review; additional evidence; oral arguments

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-4-7](#); [IC 22-3-7-27](#)

Sec. 15. **(a)** The facts upon review by the full **Board** will be determined upon the evidence introduced in the original hearing, without hearing new or additional evidence, at the discretion of the ~~industrial Board~~. Any party desiring to introduce new or additional evidence shall file an affidavit setting forth therein the names and residences of the witnesses to be called to testify before the full **Board**, the facts to which they will testify, or, if the new evidence be documentary, then a copy of the document proposed to be introduced setting forth good reason for failure to introduce such evidence at the original hearing. If such petition is granted, the opposing party shall have the right to introduce such additional evidence as may be necessary in rebuttal.

**(b)** Oral argument shall not be required in cases coming before the full **Board** on applications for review. No later than thirty (30) days prior to the date set by notice for consideration of an application by the full **Board**, the applicant or counsel may file with the ~~industrial Board~~ a brief or statement specifically setting forth the errors alleged for review, argument on those errors, and authorities, if any, supporting such argument. Such brief or statement shall be filed with seven (7) copies. The opposing party or counsel may file, no later than ten (10) days prior to such hearing date, any rebuttal. (*Worker's Compensation Board of Indiana; Rule 18; filed Aug 2, 1949, 3:50 pm; Rules and Regs. 1950, p. 76; filed May 12, 1983, 10:15 am; 6 IR 1242, eff Sep 1, 1983; errata, 6 IR 1751;*

*readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305) NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-18) to the Worker's Compensation Board of Indiana (631 IAC 1-1-15) by P.L.28-1988, SECTION 121, effective July 1, 1988.*

SECTION 9. IAC 1-1-16 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-16. X-ray films; admissibility

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-4-11](#); [IC 22-3-7-27](#)

Sec. 16. Upon hearings before the ~~industrial~~ Board or any of its members, X-ray films may be exhibited to show the existing condition of an injured employee, but such films themselves will not be considered a part of the evidence. (*Worker's Compensation Board of Indiana; Rule 19; filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 76; filed May 12, 1983, 10:15 am: 6 IR 1243, eff Sep 1, 1983; errata, 6 IR 1751; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305) NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-19) to the Worker's Compensation Board of Indiana (631 IAC 1-1-16) by P.L.28-1988, SECTION 121, effective July 1, 1988.*

SECTION 10. IAC 1-1-17 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-17. Number of witnesses; challenging jurisdiction of ~~Board~~; insurance as proof of compliance

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-2](#); [IC 22-3-4-6](#); [IC 22-3-6](#); [IC 22-3-7-24](#)

Sec. 17. **(a) Upon** hearings before the ~~industrial~~ Board or any of its members, the **Board** or such member may refuse to hear more than three witnesses produced by the same party to prove the same fact.

**(b)** When a motion or pleading is filed presenting the question of jurisdiction of the ~~industrial~~ Board, such motion or pleading shall be heard and the question presented thereby determined before the application for compensation shall be heard on its merits.

**(c)** Where an employer has insurance pursuant to the "Indiana ~~Workmen's~~ **Worker's** Compensation Act ([IC 22-3-2-IC 22-3-6](#))" and the "Indiana ~~Workmen's~~ **Worker's** Occupational Diseases Act ([IC 22-3-7](#))" the signature of such compensation carrier by its representative on behalf of such employer in the discharge of their duties under said act may be accepted by the ~~industrial~~ Board as compliance with the compensation law.

(*Worker's Compensation Board of Indiana; Rule 20; filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 77; filed May 12, 1983, 10:15 am: 6 IR 1243, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305) NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-20) to the Worker's Compensation Board of Indiana (631 IAC 1-1-17) by P.L.28-1988, SECTION 121, effective July 1, 1988.*

SECTION 11. IAC 1-1-18 IS AMENDED TO READ AS FOLLOWS:



631 IAC 1-1-18. Advice and information furnished by ~~secretary of board~~ **Executive Administrator**

Authority: IC 22-3-1-3

Affected: IC 22-3-4-3; IC 22-3-7-25

Sec. 18. The ~~secretary of the board~~ **Executive Administrator** will, upon request, advise any party as to the form of petition, answer or other paper necessary to be filed in any case, and furnish such information from the files of the board as will conduce to a full presentation of facts material to the controversy.

SECTION 12. IAC 1-1-19 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-19. Powers and duties of ~~secretary~~ **Board's Executive Administrator**

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-1-1](#)

Sec. 19. (a) The ~~secretary of the~~ **Board's Executive Administrator** is charged with the special duty of ~~directing the clerical assistants in coordinating the discharge of their duties; reof, of issuing or causing to be issued all subpoenas, and of indexing, numbering and preserving all pleadings, reports and papers filed with the board of making or having made all proper records, of giving or causing to be given all notices of hearings before the board or any member the-~~ **of the Board's staff with the needs of the worker's compensation community, the Board members and other State agencies. The Executive Administrator shall manage the operation of the Board's office in the absence of the Chairman.**

(b) The executive ~~Secretary~~ administrator shall also serve as the administrator of the self insurance and fiscal officer program and oversee the Second Injury Fund, in conjunction with the Chairman. (*Worker's Compensation Board of Indiana; Rule 22; filed Aug 2, 1949, 3:50 pm; Rules and Regs. 1950, p. 77; filed May 12, 1983, 10:15 am: 6 IR 1243, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305*) NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-22) to the Worker's Compensation Board of Indiana (631 IAC 1-1-19) by P.L.28-1988, SECTION 121, effective July 1, 1988.

SECTION 12. IAC 1-1-20 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-20. ~~Claim register; card index of claims.~~ **Record of Claims; electronic record**

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-1-3](#)

Sec. 20. The ~~secretary~~ Board shall ~~keep a claim register and a card index of~~ **maintain an electronic system of recording** claims **filed** in the office of the Board (**the card cause system**), in which all cases shall be entered at the time and in the order in which they are filed. Each case shall be numbered in the order in which it is filed. The ~~card index cause system~~ of claims shall show the title of the cause, the date of filing, the order or award, and the name of the Board member making it. The original award

shall be filed with the original papers in the case. (*Worker's Compensation Board of Indiana; Rule 23; filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 78; filed May 12, 1983, 10:15 am: 6 IR 1244, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305*) NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-23) to the Worker's Compensation Board of Indiana (631 IAC 1-1-20) by P.L.28-1988, SECTION 121, effective July 1, 1988.

SECTION 13. IAC 1-1-21 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-21. Certified copies of records, orders, and transcripts

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-4-3](#); [IC 22-3-7-25](#)

Sec. 21. (a) Certified copies of the files, orders, awards and records and transcripts of evidence will be furnished only on the written order of the party desiring the same **and upon payment of the fee for preparation of the transcript.**

(b) When a certified copy of an award or an agreement ordering payment of compensation is requested, there shall be attached to such copy the memorandum, if one has been filed, provided for by [Rule 32](#) (630 IAC 1-1-32) [[Rule 32](#), renumbered 630 IAC 1-1-32 by the revisor, was repealed filed May 12, 1983, 10:15 am: 6 IR 1248], and the certification by the ~~secretary~~ **executive administrator of the industrial board** shall include such memorandum as a part of the records of the ~~industrial Board~~ with reference to such award or agreement. (*Worker's Compensation Board of Indiana; Rule 25; filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 78; filed May 12, 1983, 10:15 am: 6 IR 1244, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305*) NOTE: Renumbered Rule 24 by 1967; 84. NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-24) to the Worker's Compensation Board of Indiana (631 IAC 1-1-21) by P.L.28-1988, SECTION 121, effective July 1, 1988.

SECTION 14. IAC 1-1-22 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-22. Appeal to court of appeals

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-4-3](#)

Sec. 22. Any party desiring to appeal to the Court of Appeals from an award of the ~~industrial Board~~ must file with the ~~secretary of the Board~~ within fifteen (15) days from the date of such award, a written praecipe designating specifically the pleadings to be incorporated into the transcript for such appeal. (*Worker's Compensation Board of Indiana; Rule 26; filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 79; filed May 12, 1983, 10:15 am: 6 IR 1244, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305*) NOTE: Renumbered Rule 25 by 1967; 84. NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-25) to the Worker's Compensation Board of Indiana (631 IAC 1-1-22) by P.L.28-1988, SECTION 121, effective July 1, 1988.



SECTION 15. IAC 1-1-23 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-23. Representing litigants before Board

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-8-1](#); [IC 22-3-8-2](#)

Sec. 23. (a) The parties to a proceeding before the ~~industrial~~ Board may appear either in person or by an attorney. Before any person shall be permitted to represent any party litigant before the ~~industrial~~ Board of Indiana, he or she shall make an oath in writing, showing qualifications as prescribed by law, in the form as follows:

STATE OF INDIANA ) SS:

COUNTY OF \_\_\_\_\_)

\_\_\_\_\_ the undersigned affirms under the penalties for perjury, that the foregoing representations are true: that he or she has been duly admitted to practice law in the Circuit and/or Superior Court of \_\_\_\_\_ County, Indiana, and in the Supreme Court of the State of Indiana, and is at this time in good standing as a practitioner before said Courts.

\_\_\_\_\_  
Signature of Attorney

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Office Address

( ) \_\_\_\_\_  
Telephone Number

( ) \_\_\_\_\_  
**Fax Number**

-----  
**E-mail Address**

\_\_\_\_\_  
**Attorney #**

**(b) Failure of any such attorney to comply with the Worker's Compensation or Occupational Disease Act as set out at Indiana Code Title 22 may subject such attorney to revocation of the attorney's certificate to practice by before the Board, upon a hearing on the issue by the full Worker's Compensation Board.**

*Worker's Compensation Board of Indiana; [Rule 27](#); filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 79; filed Aug 31, 1966, 2:15 pm: Rules and Regs. 1967, p. 84; filed May 12, 1983, 10:15 am: 6 IR 1244, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305) NOTE: Renumbered Rule 26 by 1967; 84. NOTE: Transferred from*

*the Industrial Board of Indiana (630 IAC 1-1-26) to the Worker's Compensation Board of Indiana (631 IAC 1-1-23) by P.L.28-1988, SECTION 121, effective July 1, 1988.*

SECTION 16. IAC 1-1-25 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-25. Claims for fees; disputes

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-4-12](#); [IC 22-3-7-24](#)

Sec. 25. (a) Unless otherwise ordered by the Board all claims for physician's fees, attorney's fees, nurses' fees, hospital **or medical facility** bills and all disputes pertaining thereto will be **scheduled and** heard ~~at the office of the board.~~ **in the same manner as contested claims for benefits.** In such cases the parties may make their proof by oral testimony, by depositions or by affidavits, or by all of such methods.

(b) **Billing review services wishing to review workers' compensation medical provider claims pursuant to IC 22-3-3-5.2 must complete a Certification annually, on a form prescribed by the Board.** (*Worker's Compensation Board of Indiana; [Rule 29](#); filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 80; filed May 12, 1983, 10:15 am: 6 IR 1245, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305*)  
*NOTE: Renumbered [Rule 28](#) by 1967; 84. NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-28) to the Worker's Compensation Board of Indiana (631 IAC 1-1-25) by P.L.28-1988, SECTION 121, effective July 1, 1988.*

SECTION 17. IAC 1-1-26 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-26. Compensation agreements; failure to make payments

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-4-5](#); [IC 22-3-7-27](#)

Sec. 26. (a) No later than fifteen (15) days from the date upon which the first weekly installment of compensation shall be due to an injured employee or his dependents within this state, the employer or his insurance carrier shall present to such injured employee or his dependents, if such injured employee or his dependents be at the time within said state and his or their address is known to the employer or his insurance carrier, for signature, a properly prepared compensation agreement in the form prescribed by the ~~industrial~~ Board, and at such time shall pay or tender to such person or persons all compensation then due.

(b) After the compensation agreement has been executed by the parties, it shall be filed with the ~~industrial~~ Board and a copy shall be served upon the injured employee or his dependents within fifteen (15) days of execution.

(c) The presentation to such person or persons of the check or draft of the employer or insurance carrier for the proper amount, drawn upon a bank in which money is on deposit to pay the same on demand, shall be sufficient tender of such compensation.

(d) If such agreement is not so presented and payment made or tender of the full amount of compensation then due, so made within said time, then the failure so to do may be sufficient cause for the revocation of the certificate of the employer which has authorized him to carry his own risk without insurance or of the insurance policy form of such insurance carrier: provided, that this rule shall not apply to injuries of which the employer has no notice or knowledge, or when the employer and the injured employee or his dependents, in good faith, have failed to reach an agreement in regard to the compensation payable or when the employer has reported to the ~~Industrial Board~~ within the time and in the manner required by law, and in which report the employer, in good faith, shall have denied compensation liability and shall have stated therein a valid reason for such denial. (*Worker's Compensation Board of Indiana; Rule 31; filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 81; filed May 12, 1983, 10:15 am: 6 IR 1245, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305*) NOTE: Renumbered Rule 30 by 1967; 84. NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-30) to the Worker's Compensation Board of Indiana (631 IAC 1-1-26) by P.L.28-1988, SECTION 121, effective July 1, 1988.

SECTION 18. IAC 1-1-27 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-27. Time period of payments; memorandum of termination

Authority: IC 22-3-1-3

Affected: IC 22-3-4-14; IC 22-3-7-34

Sec. 27. (a) If an injured employee, or his dependents have been awarded compensation **for temporary total disability** by the ~~Industrial Board~~, either by approval of an agreement or by an award, the employer shall continue the payments of compensation under the terms of such award or agreement for the specific period therein fixed, or until such employee returns to work, or the dependency ends, or the employer shall have in good faith disagreed with the injured employee or the dependents as to the continuation of such compensation payments.

(b) The employer or ~~such~~ employer's insurance carrier **or TPA** shall file with the ~~Industrial Board and the injured worker~~ a memorandum prescribed by the ~~Industrial Board~~ **noticing compensation payment termination whenever a notice of termination is due to the injured worker according to the Act.**

(c) **Such memoranda shall be issued for each period of compensation payments** showing

- (1) **total amount of all** payments made, the
- (2) date of the employee's return to work, **if applicable, and** the
- (3) **first date of cessation for which compensation was paid and the**
- (4) **last date for which compensation was paid and the**
- (5) reason for termination of the payments and
- (6) any other fact or facts pertaining to the ~~cessation~~ termination of said payments of compensation ~~and serve upon the employee or his dependants a copy thereof~~ **that the Board require on the approved form.**

(Worker's Compensation Board of Indiana; [Rule 32](#); filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 82; filed May 12, 1983, 10:15 am: 6 IR 1246, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305) NOTE: Renumbered [Rule 31](#) by 1967; 84. NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-31) to the Worker's Compensation Board of Indiana (631 IAC 1-1-27) by P.L.28-1988, SECTION 121, effective July 1, 1988.

SECTION 19. IAC 1-1-28 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-28. Reports by employers

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-2](#); [IC 22-3-4-13](#); [IC 22-3-4-14](#); [IC 22-3-6](#); [IC 22-3-7-34](#); [IC 22-3-7-37](#)

Sec. 28. (a) Employers who have been granted by the ~~industrial Board~~ a certificate of financial ability to pay direct compensation in the amount and manner and when due, as provided in "The Indiana ~~Workmen's~~ **er** Compensation Act ([IC 22-3-2-IC 22-3-6](#))," and the "Indiana ~~Workmen's~~ **Worker's** Occupational Diseases Act ([IC 22-3-7](#))," as well as those who have not been granted such certificate, must make all reports required by said act upon forms that are prescribed by the ~~industrial Board~~.

(b) All accident reports, pursuant to [IC 22-3-4-13](#) shall be ~~in writing and mailed to~~ **filed electronically with the industrial Board on forms** as prescribed by the Board for that purpose.

(c) Reports of disablements occasioned by an occupational disease pursuant to [IC 22-3-7-37](#) shall be ~~in writing and mailed to the industrial board on forms prescribed for that purpose~~ **also be filed electronically.** (Worker's Compensation Board of Indiana; [Rule 35](#); filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 83; filed May 12, 1983, 10:15 am: 6 IR 1246, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305) NOTE: Renumbered Rule 34 by 1967; 84. NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-34) to the Worker's Compensation Board of Indiana (631 IAC 1-1-28) by P.L.28-1988, SECTION 121, effective July 1, 1988.

SECTION 20. IAC 1-1-28.5 IS ADDED TO READ AS FOLLOWS:

631 IAC 1-1-28.5. Exempt Entities

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-2-5](#)

**Exempt entities under 22-3-2-5(a) shall provide notice to the Board of their election. The name and contact information of a person authorized to act for the purposes of worker's compensation matters, along with other pertinent data, shall be provided on the form prescribed by the Board for that purpose and updated annually. Details regarding excess coverage must be included.**

SECTION 21. IAC 1-1-29 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-29. Self-insurers; application for certification

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-2](#); [IC 22-3-4-14](#); [IC 22-3-6](#); [IC 22-3-7-34](#)

Sec. 29. Any employer other than those excepted in [IC 22-3-2-5](#) desiring a certificate of financial ability to pay compensation ~~direct~~ **directly** without insurance, shall file with the ~~industrial~~ **Board**, upon the form prescribed by the **Board**, an application for such certificate and shall furnish therein all the information required. Such employer shall certify to the ~~industrial~~ **Board** that it has adequate facilities for making necessary accident reports, executing compensation agreements and other necessary documents for the handling of ~~Workmen's~~ **worker's** compensation matters; that it has placed in charge of this work a person or persons within the state familiar with the Indiana ~~Workmen's~~ **Worker's** Compensation Act ([IC 22-3-2-IC 22-3-6](#)) and the Indiana ~~Workmen's~~ **Worker's** Occupational Diseases Act ([IC 22-3-7](#)) and the rules of the ~~industrial~~ **Board** of Indiana. Failure of such employer to timely fulfill its obligations under these laws may result in revocation of its certificate. (*Worker's Compensation Board of Indiana; Rule 37*; filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 84; filed May 12, 1983, 10:15 am: 6 IR 1246, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305) NOTE: Renumbered [Rule 36](#) by 1967; 84. NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-36) to the Worker's Compensation Board of Indiana (631 IAC 1-1-29) by P.L.28-1988, SECTION 121, effective July 1, 1988.

SECTION 22. IAC 1-1-30 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-30. Request for certification of compliance

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-2-14](#); [IC 22-3-5](#); [IC 22-3-7-34](#)

Sec. 30. (a) Upon written request, from any person, to the ~~industrial~~ **Board** for a showing of compliance by any principal contractor, intermediate contractor or subcontractor with [IC 22-3-5](#), [IC 22-3-5-1](#) and [IC 22-3-5-2](#) as required by [IC 22-3-2-14](#) and with [IC 22-3-7-34\(a\)](#) and [IC 22-3-7-34\(b\)](#) as required by [IC 22-3-7-34\(i\)](#) the ~~industrial~~ **Board** will issue a certificate showing such compliance as it is reflected by ~~the board's~~ **its** records. (b) Each request must be accompanied by a pre-addressed, stamped envelope for each party who is to receive a copy of such certificate. (*Worker's Compensation Board of Indiana; Rule 38*; filed Aug 2, 1949, 3:50 pm: Rules and Regs. 1950, p. 84; filed Aug 3, 1973, 3:00 pm: Rules and Regs. 1974, p. 361; filed May 12, 1983, 10:15 am: 6 IR 1247, eff Sep 1, 1983; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305) NOTE: Renumbered [Rule 37](#) by 1967; 84. NOTE: Transferred from the Industrial Board of Indiana (630 IAC 1-1-37) to the Worker's Compensation Board of Indiana (631 IAC 1-1-30) by P.L.28-1988, SECTION 121, effective July 1, 1988.

SECTION 23. IAC 1-1-31 IS AMENDED TO READ AS FOLLOWS:

631 IAC 1-1-31 Second Injury Fund

Authority: [IC 22-3-1-3](#)

Affected: [IC 22-3-2](#); [IC 22-3-4-5](#); [IC 22-3-6](#); [IC 22-3-7-13](#)

Sec. 31. (a) ~~The industrial Board of Indiana~~, in order to carry out the intent and purpose of the Second Injury Fund (**Fund, hereafter**), adopts the following:

(b) All employers and insurance carriers, subject to the provisions of the ~~second injury~~ Fund, shall keep an accurate record of all compensation claims paid to injured employees or their dependents under the Act ([IC 22-3-2-IC 22-3-6](#)); that the Board may examine under oath or otherwise, any person, firm or corporation, concerning the records of said compensation payments; that the Board may regulate the method and manner and provide the necessary forms whereby payments are made to said fund.

(c) All claims made ~~under of the second injury~~ Fund will be determined like other compensation claims, as provided for in [IC 22-3-4-5](#).

(d) Awards for the payment of compensation from the ~~second injury~~ Fund shall set forth that no payments out of the ~~second injury~~ Fund will be made to a claimant until the full amount due from the employer for whom he was working when he received his second injury, shall have been fully paid; said payments of compensation from the ~~second injury~~ Fund shall commence on the filing date of claimant's application for said benefits; **or the date eligibility exists or is established, whichever is latest.** All compensation payments paid out of the ~~second injury~~ Fund, shall be ordered payable every six (6) weeks. Under no circumstances will the Board consider any request for a lump sum settlement. Any award made under the provisions of the ~~second injury~~ Fund shall be subject to review, modification or cancellation, as provided for under the provision of the Indiana ~~Workmen's~~ **Worker's Compensation Law Act.**

(e) The ~~second injury~~ Fund shall be under the direction and supervision of an administrator named and appointed by the full ~~industrial~~ Board. The administrator shall be charged with the duty of administering said ~~second injury~~ fund as hereinbefore prescribed and, additionally, said administrator shall personally review each application filed with the Board requesting benefits from the ~~second injury~~ Fund. In any case where the administrator of the ~~second injury~~ Fund determines that there is a question of legal entitlement to any benefits from the ~~second injury~~ Fund the administrator shall refer a copy of said application to the office of the ~~attorney general~~ **Attorney General** of Indiana along with a letter or memorandum indicating wherein said administrator ~~feels~~ **believes** a question of legal entitlement exists. ~~and~~ **Before** said application is set for hearing before a single member of the ~~industrial Board of Indiana~~, the attorney general shall have the right to defend said Fund against said application for allowance of Second Injury Fund benefits. The Attorney General of Indiana may designate which duly appointed deputy shall appear for said defense. (*Worker's Compensation Board of Indiana; Rule 39; filed Jul 17, 1963, 11:10 pm; Rules and Regs. 1964, p. 106; filed Dec 27, 1976, 3:45 pm; Rules and Regs. 1977, p. 219; filed May 12, 1983, 10:15 am: 6 IR 1247, eff Sep 1, 1983; errata, 6 IR 1751; readopted filed Nov 13, 2001, 12:20 p.m.: 25 IR 1305*) **NOTE: Renumbered Rule 38 by 1967; 84. NOTE: Transferred from the Industrial**



*Board of Indiana (630 IAC 1-1-38) to the Worker's Compensation Board of Indiana (631 IAC 1-1-31) by P.L.28-1988, SECTION 121, effective July 1, 1988.*

SECTION 24. 631 IAC 1-1-32 IS ADDED TO READ AS FOLLOWS:

**631 IAC 1-1-32. Medical Provider Fee Claims**

**Authority: IC 22-3-1-3**

**Affected: IC 22-3-3-5**

**Sec. 32. The Board, pursuant to IC 22-3-1-3, and in order to regulate proceedings under IC 22-3-3-5, adopts the following:**

**a. Definitions**

- (1) "Payer shall mean an agent, designee, employee, assignee, or an independent contractor of the Employer including a billing review service utilized by the payer for services performed under the Act."**
- (2) "Written communication shall mean the written statement made by a payer to a health care provider, in response to a claim for payment submitted to the payer by the provider, wherein the payer notifies the provider of the payer's determination of the employer's pecuniary liability for the medical treatment, services and supplies that comprised the provider's claim for payment."**
- (3) "CPT" refers to the Current Procedural Terminology manual published annually by the American Medical Association.**
- (4) "CMS" refers to Centers for Medicare and Medicaid Services, an agency of the U. S. Department of Health and Human Services.**

**b. Payment of Medical Benefits**

**(1) Uncontested Payment for Billed Services**

- (A) Providers shall submit bills for services rendered within one hundred twenty (120) days of the date of service. Bills submitted by Providers for payment shall state the Provider's actual charges for the treatment rendered. A Provider's statement of actual charges is not to be construed as a request for payment in excess of the medical fee cap or schedule. The billing statement must be in detailed line item form. The Payer to whom the bill is submitted shall calculate the proper amount of the payment for the treatment rendered.**

**(B) Unless contested in accordance with the provisions set forth in this section, all bills submitted by a Provider are due and payable in accordance with I.C. 22-3-3-5 within ninety (90) days after receipt of the bill by the Payer. Date of receipt may be established by the Payer's date stamp or electronic acknowledgement date; otherwise, receipt is presumed to occur three (3) days after the date the bill was mailed to the Payer's correct address. Payer may request additional documentation to support medical bills submitted for payment by Provider, as long as the additional documentation is relevant to the treatment for which payment is sought. If a payer requests additional information or records from a Provider, the 90-day period shall be tolled until the documentation is received by Payer.**

**(C) The Payer shall supply a written Explanation of Review (EOR) to the Provider, describing the calculation of payment of medical bills submitted by the Provider. If payment is based on changes to a Provider's codes, the EOR shall specifically state the justification for changing the original codes. If payment of a bill is denied entirely, Payer shall provide a written, detailed explanation for the denial of each covered item.**

**(2) When Payer fails to make timely payment of uncontested billed services, the Provider shall first attempt to resolve payment with the Payer and/or the medical review service, by any means set out in a relevant contract between the parties and those steps set out on the Board's website. Where such attempts are unsuccessful, the billing party may request assistance from the Board by first contacting the Board's Medical Claims Reviewer and thereafter filing an Application for Adjustment of Claim for Provider Fee if necessary.**

**c. Medical Bill Disputes**

**(1) Contested Payment for Billed Services**

**(A) In all cases where a billed service is contested by the Payer, the Payer shall, within ninety (90) days of receipt of such bill, submit to the Provider a written notification of contest setting out the reason for denial.**

**(B) The written non-medical notification of contest shall include the following information:**

- (i) Name of the injured worker;**
- (ii) Date(s) of service(s) being contested;**
- (iii) Payer's accident number and/or Board's claim number, if applicable;**
- (iv) If applicable, acknowledgement of specific uncontested and paid items submitted on the same bill as contested services;**

- (v) Reference to the bill and each item of the bill being contested; and,
  - (vi) Reason(s) for contesting the payment of any item. The explanation shall include the citing of appropriate statutes, rules and/or documents supporting the Payer's reasons for contesting payment.
- (C) If the Payer agrees a service or procedure was reasonable and necessary, the Provider's lack of prior authorization for payment does not warrant denial of liability for payment of the appropriate amount due under the Act.
  - (D) The Provider shall have sixty (60) days to respond to the Payer's written or electronic notification of contest. Thereafter, the Payer shall have thirty (30) days to respond to the Provider's Response to the notification of contest. If the parties are unable to resolve a dispute relating to the correct payment of a bill, an Application for Adjustment of Claim for Provider Fee may be filed after first contacting the Board's Medical Claims Reviewer for assistance.
  - (E) The Payer may only make changes to a Provider's billing codes consistent with AMA Guidelines and Definitions in CPT Coding instructions, Medicare guidelines, the Act and the Indiana Administration Code.

**d. Adjudication of Provider Fee Claims-Providers' Responsibilities**

- (1) Prior to filing an Application for Adjustment of Claim for Provider Fee ("Application"), the medical provider, the employer, its insurer, and/or its billing review service must engage in a good faith attempt to negotiate an agreed payment.
- (2) When seeking clarification or dispute resolution from the Board, the Provider must provide the following upon the request of the Board:
  - (A) The fully completed and signed Provider Fee Application, which must identify the specific charges for which it seeks (additional) reimbursement beyond any reimbursement allowed by the Payer;
  - (B) A copy of CMS 1500 or UB04, whichever is applicable, or its replacement;
  - (C) A copy of the first and final requests for reimbursement by the Provider to the Payer. These requests should indicate the name and address of the person contacted, the employee's name, address, date of service, and any other information that will assist carrier or employer in identifying the claim;

- (D) All information submitted by Provider to Payer including a detailed copy of the bill with the contested codes and dates of service in dispute;
  - (E) A complete copy of the Payer's explanation as to why the billed services are being contested;
  - (F) Documentation of Provider and Payer's negotiation proceedings and independent attempts to settle the matter; and,
  - (G) A copy of all relevant medical record documentation.
  - (H) Applications submitted without all of the above will not be filed.
- (3) The Provider shall furnish a copy of the Application and all attachments to the employer, its insurer or the billing review service if designated by the employer or its insurer.

**e. Adjudication of Provider Fee Disputes-Defendants' Responsibilities**

- (1) Within thirty (30) days of the filing of Providers' Application, Payer must submit to the Board a written response setting forth the reasons that (additional) reimbursement is not required. Evidence rebutting Provider's demand shall accompany its response, including the data relied on to adjust the bill, if relevant.
- (2) The Payer shall furnish the Provider with copies of the evidence provided to the Board in response to the Provider's Application. Thereafter, within thirty (30) days of the filing of Payer's response, Provider shall file with the Board rebuttal evidence, if any, it intends to use in support of its claim.

**f. Multiple Procedures**

When performing more than one surgical procedure in a single surgical setting, multiple surgery guidelines shall apply, (100% of the listed value for the primary procedure and 50% of the listed value for additional procedures). The 50% reduction does not apply to procedures that are identified in the applicable edition of the CPT as "Add-on" or Modifier 551-exempt procedures.

**g. Fragmenting or Unbundling of Charges by Providers**

Provider may not fragment or unbundle charges except as consistent with AMA Guidelines, CPT Coding Instructions or Medicare rules and regulations.

**h. Out-of-State Medical Treatment**

- (1) Out of state medical providers treating injured employees pursuant to the Indiana Act, shall be reimbursed according to the Worker's Compensation

Act of Indiana and these administrative provisions. The filing of a First Report of Injury with the Board shall be prima facie proof of jurisdiction in Indiana.

- (2) When an injured employee is treated outside of Indiana, the applicable fee shall be that which would apply if the care had been provided in this state, at a location with a similar population and medical community as that of the location of care. Categorization of a hospital or facility provider according to any Indiana standards shall also apply.

**i. Special Reports**

- (1) Payment shall be made for special reports (CPT code 99080) only if these reports are specifically requested by the Payer. Office notes and other documentation which are necessary to support billed provider codes may not be considered special reports.
- (2) Payment for special reports shall be at 100% of Provider's usual and customary charge.

**j. Surgical Assists**

Assists in surgery will be reimbursed if indicated by the relevant surgical specialty society, CMS or Medicare guidelines as medically necessary. The rate of reimbursement is indicated by attaching modifier 80, 81 or 82 to surgical procedures. Reimbursement for procedures modified by 80 or 82 will be at 20% of the applicable fee schedule or rate for the code presented. Reimbursement for procedures modified by 81 will be made at 10%. Multiple and bilateral procedure rules apply.

**k. Utilization Review**

The Board recognizes URAC's Workers' Compensation Management 2008 guidelines to medical utilization practices. This may be offered as one form of evidence regarding appropriate medical care; however, it will not be considered as conclusive evidence by the single hearing member or the full Board.

SECTION 24. 631 IAC 1-1-33 IS ADDED TO READ AS FOLLOWS:

**631 IAC 1-1-33. Fees for Mediation by the Board**

Authority: IC 22-3-4-4.5

Affected: IC 22-3-1-3, 22-3-4-5

**Sec. 33. The charge for mediation by a qualified employee of the Board shall be a flat fee of \$350.00 for five hours of mediation, with an hourly rate of \$50.00 for each hour thereafter. No travel expenses will be paid by the parties.**